



Allband Communications Cooperative Employment Application

Application Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State Zip Code

Phone: (____) _____ E-mail Address: _____

Date Available: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a Citizen of the United States? Yes No If no, are you authorized to work in the U.S.? Yes No

Have you ever worked for this company? Yes No If yes, when? _____

Have you every been convicted of a felony? Yes No Yes No

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate: Yes No Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate: Yes No Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate: Yes No Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
 Company: _____ Phone: (____) _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: (____) _____
 Address: _____

Full Name: _____ Relationship: _____
 Company: _____ Phone: (____) _____
 Address: _____

Previous Employment

Company: _____ Phone: (____) _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for leaving: _____
May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone: (____) _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for leaving: _____
May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone: (____) _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for leaving: _____
May we contact your previous supervisor for a reference? Yes No

Military Service

Branch: _____ From: _____ To: _____
Rank of Discharge: _____ Type of Discharge: _____
If other than honorable, explain: _____

Disclaimer and Signature

I certify that the information given herein is true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of the information provided herein and other matters related thereto as may be necessary. I hereby release employers, schools, other persons, institutions, or businesses from all liability in responding to inquiries in connection with my application. I understand that false or misleading information given in my application or during interview may result in a refusal to hire or discharge in the event of employment. I understand and agree that, if hired, my employment is at will. I

also understand that if I am hired my employment is for no definite period of time. I may terminate my employment at any time and I may be dismissed at any time, without cause and without any prior notice. I further understand and agree that nothing in this application form shall constitute a contract of employment or shall constitute a contract or a guarantee of employment. Should I be hired, I further understand and agree that any Federal or State statutory claims I may have against the employer shall be submitted to binding arbitration governed by the rules of the American Arbitration Association. The costs of this binding arbitration shall be equally shared by my employer and myself. I also understand that any policies or procedures implemented by the company in the event of my employment are for purposes of operations only and are not intended to be nor constitute a contract for my employment. In addition, I understand that any of these policies and/or procedures may be changed at any time at the employer's discretion and without notice.

Signature: _____ Date: _____

PLEASE MAIL APPLICATION OR FAX TO ALLBAND VIA THE INFORMATION LISTED BELOW